

Application Data Sheet**Application Information**

Application Number::

Filing Date::

Application Type::

US National Phase

Subject Matter::

Utility

Suggested Classification::

Suggested Group Art Unit::

Title::

**PROCESS AND DEVICE FOR POSITIONING AN
OPTICAL COMPONENT BETWEEN TWO
OPTICAL FIBERS**

Attorney Docket Number::

62843 (4590-358)

Request for Early Publication::

Request for Non-Publication::

Suggested Drawing Figure::

Total Drawing Sheets::

2**Applicant Information**

Applicant Authority Type::

Inventor

Primary Citizenship Country::

Status::

Given Name::

Jean-Pierre

Middle Name::

Family Name::

MOY

Name Suffix::

City of Residence::

State or Province of Residence::

Country of Residence::

Street of Mailing Address::

City of Mailing Address::

Postal or Zip Code::

Applicant Authority Type:: **Inventor**

Primary Citizenship Country::

Status::

Given Name:: **Romain**

Middle Name::

Family Name:: **RAMEL**

Name Suffix::

City of Residence::

State or Province of Residence::

Country of Residence::

Street of Mailing Address::

City of Mailing Address::

Postal or Zip Code::

Applicant Authority Type:: **Inventor**

Primary Citizenship Country::

Status::

Given Name:: **Emmanuel**

Middle Name::

Family Name:: **DHARDEMARE**

Name Suffix::

City of Residence::

State or Province of Residence::

Country of Residence::

Street of Mailing Address::

City of Mailing Address::

Postal or Zip Code::

Correspondence Information

Correspondence Customer No:: **33308**
Phone Number:: **(703) 684-1111**
Fax Number:: **(703) 518-5499**
E-Mail Address::

Representative Information

Representative Customer Number:
Representative Designation:: Registration Number:: Representative Name::
Primary or Associate

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
FR	02 09534	July 26, 2002	Yes

Assignee Information

Assignee Name:: **ATMEL GRENOBLE S.A.**
Street of Mailing Address:: **Avenue de Rochepleine**
City of Mailing Address:: **Saint Egrevé**
State of Mailing Address::
Country of Mailing Address:: **France**
Postal or Zip Code:: **38120**